

Status: Finalized

## I. Center Identification

Organization Name: MICHIANA ENDOSCOPY CENTER LLC

Street Address: 53830 Generations Drive

City: South Bend

County: St Joseph

Administrator Name: Sally Zablocki RN

Administrator Email: szablocki@amsurg.com ASC Web Address: www.michianaendo.com

Fiscal Year: 2016

Accredited: • Yes • No

Name of Accrediting Body: AAAHC

Deemed Status: Yes No

Corporate Tax Status: • For Profit • Non Profit

## II. Identification of Surgical Resources

| Number of operating rooms | 0 |
|---------------------------|---|
| Number of procedure rooms | 4 |

## III. Utilization Statistics

| A. Total Patients and Procedures                   |                    |                         |  |  |
|--|--------------------|-------------------------|--|--|
| Time Period  | Number of Patients | Number of Procedures    |  |  |
| Persons Served in twelve-month period              | 8,369              | 8,971                   |  |  |
| B. Ten Most Frequent Surgical Procedures Performed |                    |                         |  |  |
| CPT Code   |                    | <b>Total Procedures</b> |  |  |
| 45385  |                    | 3,202                   |  |  |
| 43239  |                    | 1,775                   |  |  |
| 45378  |                    | 1,530                   |  |  |
| 45380  |                    | 1,528                   |  |  |
| 43248  |                    | 537                     |  |  |
| 43235  |                    | 536                     |  |  |
| G0105  |                    | 270                     |  |  |

| G0121 | 264 |
|-------|-----|
| 43251 | 55  |
| 45381 | 37  |

## IV. Outcomes from Surgical Procedures

| Number of patients with a Post-Surgical wound infection within 30 days following | 0 |
|--|---|
| a surgical encounter.  |   |